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Fill in this information to identify your ca	ise:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

#### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on your LaScha government-issued picture First Name First Name identification (for example, your driver's license or Middle Name Middle Name passport). **Jones** Last Name Bring your picture Last Name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you have used in the last 8 First Name First Name years Middle Name Middle Name Include your married or maiden names. Last Name Last Name Only the last 4 digits of xxx - xx - 0 3 1 3your Social Security number or federal OR **Individual Taxpayer** Identification number (ITIN) Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer **Identification Numbers** Business name Business name (EIN) you have used in the last 8 years Business name Business name Include trade names and

doing business as names

Business name

Business name

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Del	btor 1 LaScha Jones			Case number (if kno	wn)	
		About Debtor 1:		About Debtor 2	2 (Spouse Only in a Joint Case):	
		<u></u>		<u></u>		
		_		_		
		EIN		EIN		
5.	Where you live			If Debtor 2 live	s at a different address:	
		3423 W. 85th F	PI			
		Number Street		Number Street		
					_	
		Chicago City	IL 60652 State ZIP Code	City	State ZIP Code	
		Cook	Claid Zii Codo	Ony	State Zii Sodo	
		County		County		
			ddress is different from	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
			ill it in here. Note that the ny notices to you at this			
		mailing address.	iy nouces to you at this			
		Number Street		Number Street		
		Number Street		Number Street		
		P.O. Box		P.O. Box		
			State ZIP Code		State ZIP Code	
6.	Why you are choosing	P.O. Box	State ZIP Code	P.O. Box		
6.	Why you are choosing this district to file for bankruptcy	P.O. Box  City  Check one:  Over the las petition, I ha	State ZIP Code at 180 days before filing this ave lived in this district longer other district.	P.O. Box  City  Check one:  Over the lapetition, I have the lapetition of the lapeti		
6.	this district to file for	P.O. Box  City  Check one:  Over the last petition, I hat than in any of the last petition.	st 180 days before filing this ave lived in this district longer	P.O. Box  City  Check one:  Over the la petition, I have ano	State ZIP Code  ast 180 days before filing this have lived in this district longer	
	this district to file for bankruptcy	P.O. Box  City  Check one:  Over the last petition, I hat than in any of the last petition.	st 180 days before filing this ave lived in this district longer other district.  ner reason. Explain.  S.C. § 1408.)	P.O. Box  City  Check one:  Over the la petition, I have ano	State ZIP Code  ast 180 days before filing this have lived in this district longer of their district.  ther reason. Explain.	
	this district to file for bankruptcy	P.O. Box  City  Check one:  Over the last petition, I hat than in any of the last petition in any of the last petition in any of the last petition. I have anoth (See 28 U.S.)  bout Your Bankr  Check one: (For a	st 180 days before filing this ave lived in this district longer other district.  ner reason. Explain.  S.C. § 1408.)	P.O. Box  City  Check one:  Over the lapetition, I have and (See 28 U.)	State ZIP Code  ast 180 days before filing this have lived in this district longer of their district.  Ather reason. Explain.  S.C. § 1408.)	
P	this district to file for bankruptcy  Part 2: Tell the Court A  The chapter of the Bankruptcy Code you are choosing to file	P.O. Box  City  Check one:  Over the last petition, I hat than in any of the last petition of	st 180 days before filing this ave lived in this district longer other district.  ner reason. Explain.  5.C. § 1408.)  Fuptcy Case  brief description of each, see N	P.O. Box  City  Check one:  Over the lapetition, I have and (See 28 U.)	State ZIP Code  ast 180 days before filing this have lived in this district longer of their district.  Ather reason. Explain.  S.C. § 1408.)	
P	this district to file for bankruptcy  Part 2: Tell the Court A  The chapter of the Bankruptcy Code you	P.O. Box  City  Check one:  Over the last petition, I hat than in any of the last petition of the last petition of the last petition of the last petition, I have anoth (See 28 U.S.)  bout Your Bankr  Check one: (For a for Bankruptcy (For Chapter 7)  Chapter 7	st 180 days before filing this ave lived in this district longer other district.  ner reason. Explain.  5.C. § 1408.)  Fuptcy Case  brief description of each, see N	P.O. Box  City  Check one:  Over the lapetition, I have and (See 28 U.)	State ZIP Code  ast 180 days before filing this have lived in this district longer of their district.  Ather reason. Explain.  S.C. § 1408.)	
P	this district to file for bankruptcy  Part 2: Tell the Court A  The chapter of the Bankruptcy Code you are choosing to file	P.O. Box  City  Check one:  Over the last petition, I hat than in any of the last petition of the last petition, I hat the last petition of the last petition, I have anoth (See 28 U.S.)  bout Your Bankr  Check one: (For a for Bankruptcy (For Chapter 7)  Chapter 7	st 180 days before filing this ave lived in this district longer other district.  ner reason. Explain.  5.C. § 1408.)  Fuptcy Case  brief description of each, see N	P.O. Box  City  Check one:  Over the lapetition, I have and (See 28 U.)	State ZIP Code  ast 180 days before filing this have lived in this district longer of their district.  Ather reason. Explain.  S.C. § 1408.)	
P	this district to file for bankruptcy  Part 2: Tell the Court A  The chapter of the Bankruptcy Code you are choosing to file	P.O. Box  City  Check one:  Over the last petition, I hat than in any of the last petition of the last petition of the last petition of the last petition, I have anoth (See 28 U.S.)  bout Your Bankr  Check one: (For a for Bankruptcy (For Chapter 7)  Chapter 7	st 180 days before filing this ave lived in this district longer other district.  ner reason. Explain.  5.C. § 1408.)  Fuptcy Case  brief description of each, see N	P.O. Box  City  Check one:  Over the lapetition, I have and (See 28 U.)	State ZIP Code  ast 180 days before filing this have lived in this district longer of their district.  Ather reason. Explain.  S.C. § 1408.)	

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Deb	tor 1 LaScha Jones	LaScha Jones   Case number (if known)					
8.	How you will pay the fee	cou pay	Il pay the entire fee when I file my p rt for more details about how you may with cash, cashier's check, or money alf, your attorney may pay with a credi	pay. Typically, order. If your a	if you are pay ttorney is subr	ring the fee yourself, you mitting your payment on	ı may
			red to pay the fee in installments. If viduals to Pay The Filing Fee in Install	•		and attach the Application	on for
		By I thar fee	quest that my fee be waived (You m aw, a judge may, but is not required to a 150% of the official poverty line that in installments). If you choose this op ag Fee Waived (Official Form 103B) ar	o, waive your fee applies to your otion, you must f	e, and may do family size and ill out the App	so only if your income is d you are unable to pay	s less the
9.	Have you filed for	<b>☑</b> No					
	bankruptcy within the last 8 years?	☐ Yes	i.				
		District		When _		Case number	
		District _		When _	M / DD / YYYY	Case number	
		District				Case number	
10.	Are any bankruptcy	<b>☑</b> No					
	cases pending or being filed by a spouse who is	☐ Yes	i.				
	not filing this case with	Debtor			Relationsh	ip to you	
	you, or by a business partner, or by an	District		When		Case number,	
	affiliate?	-		M	M / DD / YYYY		
		Debtor			_ Relationsh	ip to you	
		District		When		Case number,	
				M	M / DD / YYYY	if known	
11.	Do you rent your residence?	✓ No. ✓ Yes	Go to line 12.  . Has your landlord obtained an evic	tion judgment a	gainst you?		
		_	No. Go to line 12.  Yes. Fill out Initial Statement and file it as part of this bankr		on Judgment .	Against You (Form 101 <i>8</i>	A)

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Deb	tor 1 LaScha Jones				Cas	se number (if known)		
Pa	art 3: Report About Ar	ıy Bı	usine	sses You Own as	a Sole Proprieto	or		
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of I	ousiness			
	A sole proprietorship is a business you operate as an			Name of business, if any				
	individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Number Street				
	If you have more than one sole proprietorship, use a			City		State	ZIP Co	ode
	separate sheet and attach it to this petition.			Single Asset Rea	iness (as defined in al Estate (as defined defined in 11 U.S.C. er (as defined in 11	11 U.S.C. § 101(27A) in 11 U.S.C. § 101(54 § 101(53A))		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	can mo:	set ap st rece	filing under Chapter 11, opropriate deadlines. If nt balance sheet, state of these documents do n	you indicate that you ment of operations, o	u are a small business cash-flow statement, a	debtor, you nd federal ir	nust attach your ncome tax return
	debtor?	V	No.	I am not filing under C	Chapter 11.			
	For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.		Γ a small business del	otor accordir	ng to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	oter 11 and I am a sn	nall business debtor a	ccording to t	the definition in the
Pa	Report If You Ov	vn o	r Hav	e Any Hazardous	Property or Any	Property That N	eeds Imn	nediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention	is needed, why is it	needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property	? Number Street			
	•				City		- State	ZIP Code
					∪ny .		Olale	_ ii

Deb	tor 1 LaScha Jo	nes	Case number (if known)					
Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling								
15.	Tell the court whether you	About Debtor 1: You must check one:	About Debtor 2 (Spouse Only in a Joint Case): You must check one:					
	have received a briefing about credit counseling.	✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.	☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.					
	The law requires	Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.	Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.					
	that you receive a briefing about credit counseling before you file for bankruptcy. You	☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.	☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.					
	must truthfully check one of the following choices.	Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.	Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.					
	If you cannot do so, you are not eligible to file.	☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent	☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent					
	If you file anyway, the court can dismiss your case,	circumstances merit a 30-day temporary waiver of the requirement.	circumstances merit a 30-day temporary waiver of the requirement.					
	you will lose whatever filing fee you paid, and your creditors can begin collection activities again.	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.					
		Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.					
		If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.	If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.					
		Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.	Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.					
		☐ I am not required to receive a briefing about	☐ I am not required to receive a briefing about					

 □ I am not required to receive a briefing abou credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me

incapable of realizing or making

rational decisions about finances.

My physical disability causes me

to be unable to participate in a

credit counseling because of:

□ Disability.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1		LaScha Jones				Case number (if	know	n)
P	art 6:	Answer These C	Questi	ons for Reporting Pu	ırpos	ses		
have?  as "incurred by  No. Go to  Yes. Go  16b. Are your debt  money for a bu  No. Go to		ind of debts do you	16a.	as "incurred by an individual No. Go to line 16b.	dual pi	sumer debts? Consumer de rimarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
		•	-	iness debts? Business debitment or through the operation		debts that you incurred to obtain e business or investment.		
			16c.	State the type of debts y	ou ow	e that are not consumer or bu	sines	s debts.
17. Are you filing under Chapter 7? No. I am not filing under Chapter 7. Go to line 18.					oter 7. Go to line 18.			
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution ecured creditors?	V	· ·	•	•	•	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do timate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you te your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	0000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	LaScha Jones		Case number (if known)			
Part 7:	Sign Below					
For you		I have examined this petition, and I decla and correct.	re under penalty of perjury that the information provided is true			
		•	am aware that I may proceed, if eligible, under Chapter 7, 11, 12, iderstand the relief available under each chapter, and I choose to			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to he fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the cha	apter of title 11, United States Code, specified in this petition.			
		•	concealing property, or obtaining money or property by fraud in esult in fines up to \$250,000, or imprisonment for up to 20 years, and 3571.			
		X /s/ LaScha Jones LaScha Jones, Debtor 1	X Signature of Debtor 2			
		Executed on <b>03/07/2018</b>	Executed on			

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1	LaScha Jones		Case number (if know	n)			
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.		I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.					
		X /s/ Robert J. Adams & Associates Signature of Attorney for Debtor	Date	03/07/2018 MM / DD / YYYY			
		Robert J. Adams & Associates Printed name  Robert J Adams & Associates Firm Name  901 W Jackson Suite 202  Number Street					
		Chicago City	IL State	60607 ZIP Code			
		Contact phone (312) 346-0100	Email address <b>staff.r</b>	a@gmail.com			
		0013056 Bar number	IL State	_			

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Fill in this in	nformation to id	entify your case	and this filing:		
Debtor 1	LaScha		Jones		
Doblo.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filin	a) First Name	Middle Name	Last Name		
			DISTRICT OF ILLINOIS		
Officed States E	Sankrupicy Court for	ine. NORTHERN I	DISTRICT OF ILLINOIS		
Case number (if known)				_	if this is an led filing
Official For					
Schedule /	A/B: Property				12/15
sheet to this for	m. On the top of ar	y additional pages	ring correct information. If more write your name and case numbers, which was not been seen that the more writers and the more with the world with the more writers and the writers are writers.	oer (if known). Answer eve	ry question.
✓ No. G	n or have any legal o to Part 2. Where is the property	•	t in any residence, building, land	l, or similar property?	
	•	•	of your entries from Part 1, inclirite that number here	_	\$0.00
Part 2: D	escribe Your Ve	hicles		•	
	- · ·	•	in any vehicles, whether they are also report it on Schedule G: Execution	_	-
3. Cars, vans,	, trucks, tractors, sp	oort utility vehicles,	motorcycles		
□ No ☑ Yes					
3.1. Make:	Chrysler	Who has Check or	an interest in the property?	Do not deduct secured clai amount of any secured clai	·
Model:	300	 ✓ Debt	or 1 only	Creditors Who Have Claim	s Secured by Property.
Year:	2014	Debt	or 2 only or 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate mile	eage: <b>37,000</b>		ast one of the debtors and another		\$17,000.00
Other information	n:	_		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
2014 Chrysler miles); value,	300 (approx. 370 per kbb.com		ck if this is community property instructions)		
	•	•	r recreational vehicles, other veh ft, fishing vessels, snowmobiles, m	•	
☑ No □ Yes					
	•	•	of your entries from Part 2, incl		\$17,000.00

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Deb	otor 1	LaScha Jones	Case number (if known)
P	art 3:	Describe Your Personal and Household Items	
		or have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6.		nold goods and furnishings les: Major appliances, furniture, linens, china, kitchenware	
	☐ No ✓ Yes	s. Describe owns no furniture	\$0.00
7.	Electro Exampl	nics es: Televisions and radios; audio, video, stereo, and digital equipment; com music collections; electronic devices including cell phones, cameras, me	
	☐ No ✓ Yes	s. Describe Cell Phone, Lab top, TV, Ipad, and small applainces	\$1,800.00
8.		ibles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures stamp, coin, or baseball card collections; other collections, memorabilia,	•
	✓ No ☐ Yes	s. Describe	
9.		nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, po canoes and kayaks; carpentry tools; musical instruments	ool tables, golf clubs, skis;
	✓ No ☐ Yes	s. Describe	
10.	Firearm Exampl	ns les: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No ☐ Yes	s. Describe	
11.	Clothes Exampl	s les: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	☐ No ✓ Yes	s. Describe Clothes	\$400.00
12.		<ul> <li>es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, he gold, silver</li> </ul>	eirloom jewelry, watches, gems,
	✓ No ☐ Yes	s. Describe	
13.		rm animals es: Dogs, cats, birds, horses	
	✓ No ☐ Yes	s. Describe	
14.	Any oth	ner personal and household items you did not already list, including any list	health aids you
		s. Give specific	
15.		e dollar value of all of your entries from Part 3, including any entries for	- L &2 200 00

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Den	101 1 <u>L</u>	ascha Jones	Case number (if known)	
P	art 4:	Describe Your Final	ncial Assets	
			able interest in any of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16.	Cash Examples	: Money you have in your petition	wallet, in your home, in a safe deposit box, and on hand when you file your	
	□ No ✓ Yes		Cash:	\$10.00
17.	<b>Deposits</b> <i>Examples</i>	: Checking, savings, or of	ther financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same	
	□ No ☑ Yes		Institution name:	
	17.1.	Checking account:	Checking account; Chicago Patrol Credit Union	\$0.00
	17.2.	Checking account:	Checking account	\$1,900.00
	17.3.	Savings account:	Savings account; South Division Federal Credit Union	\$400.00
18.	Examples No	nutual funds, or publicly Bond funds, investment Instituti	accounts with brokerage firms, money market accounts	
19.	-	icly traded stock and int st in an LLC, partnership	erests in incorporated and unincorporated businesses, including	
	✓ No ☐ Yes. inform	Give specific nation about	of entity: % of ownership:	
20.	Negotiabl	e instruments include pers	s and other negotiable and non-negotiable instruments sonal checks, cashiers' checks, promissory notes, and money orders. se you cannot transfer to someone by signing or delivering them.	
	inform	Give specific nation about Issuer	name:	
21.		nt or pension accounts  : Interests in IRA, ERISA, profit-sharing plans	, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or	
		List each unt separately. Type of a	account: Institution name:	

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Deb	tor 1	LaScha Jones	Case number (if known)		
22.	Your sha		payments  posits you have made so that you may continue service or use from a company h landlords, prepaid rent, public utilities (electric, gas, water), telecommunications		
23.	_	s (A contract for a	Institution name or individual: specific periodic payment of money to you, either for life or for a number of years	)	
	<b>√</b> No		Issuer name and description:	,	
24.	Interest	s in an education I	RA, in an account in a qualified ABLE program, or under a qualified state tuit A(b), and 529(b)(1).	ion pro	gram.
	✓ No ☐ Yes.		Institution name and description. Separately file the records of any interests. 11	U.S.C.	§ 521(c)
25.	Trusts,		interests in property (other than anything listed in line 1), and rights or		
	. No No Yes.	Give specific mation about them			
26.	Example No Yes.		marks, trade secrets, and other intellectual property; names, websites, proceeds from royalties and licensing agreements		
27.	Example		other general intangibles s, exclusive licenses, cooperative association holdings, liquor licenses, professiona	al licens	ses
		Give specific mation about them	Debtor paid \$24,250 for this franchise in March of 2017, https://actikare.com/senior-care-franchise/		\$5,000.00
			Cannot sell or return it, debtor has been ill and has not substainally started the business nor has a client list		
Mor	ney or pro	operty owed to you	u?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu	ınds owed to you			
		Give specific inforut them, including w		Federal:	:
	you	already filed the ret the tax years	turns	State:	
29.	Family s		ر p sum alimony, spousal support, child support, maintenance, divorce settlement, p	Local: property	settlement
	<b>√</b> No				
	Yes.	Give specific info	rmation Alimony:  Maintenance	۵.	
			Support:		
			Divorce settl	lement:	
			Property set	tlement	:

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Debt	or 1 LaScha Jones Case number (if known)	
30.	Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	
	<ul><li>✓ No</li><li>☐ Yes. Give specific information</li></ul>	
31.	Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's ins  ✓ No  ✓ Yes. Name the insurance	surance
	company of each policy and list its value	Surrender or refund value:
32.	Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died	
	✓ No  Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	✓ No ☐ Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims	
	✓ No ☐ Yes. Describe each claim	
35.	Any financial assets you did not already list	
	<ul><li>✓ No</li><li>✓ Yes. Give specific information</li></ul>	
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$7,310.00
Pa	rt 5: Describe Any Business-Related Property You Own or Have an Interest In. List a	ny real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	No. Go to Part 6.  ✓ Yes. Go to line 38.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned	ciains of exemptions.
	✓ No  Yes. Describe	
39.	Office equipment, furnishings, and supplies  Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
	✓ No  Yes. Describe	
40.	Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
	✓ No  Yes. Describe	

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Deb	tor 1	LaScha Jones	Case number (if known)
41.	Invento	ry	
	✓ No ☐ Yes	. Describe	
42.	Interest	s in partnerships or joint ventures	
	✓ No ☐ Yes	. Describe Name of entity:	% of ownership:
43.	Custom	er lists, mailing lists, or other compilations	
	✓ No ☐ Yes	Do your lists include personally identifiable information (as defined No Yes. Describe	in 11 U.S.C. § 101(41A))?
44.	Any bus	siness-related property you did not already list	
	□ No ✓ Yes	. Give specific information.	
		ones Custom Care, Inc. stablished to start a day care business; business has yet to op	pen. \$100.00
45.		dollar value of all of your entries from Part 5, including any entries for Part 5. Write that number here	
Pa		Describe Any Farm- and Commercial Fishing-Related Prof f you own or have an interest in farmland, list it in Part 1.	operty You Own or Have an Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercia	al fishing-related property?
	_	Go to Part 7 Go to line 47.	
			Current value of the portion you own?  Do not deduct secured claims or exemptions.
47.	Farm an	nimals es: Livestock, poultry, farm-raised fish	
	✓ No ☐ Yes		
48.	Crops	either growing or harvested	
	_	. Give specific	
49.	Farm an	nd fishing equipment, implements, machinery, fixtures, and tools of tr	rade
	✓ No ☐ Yes		
50.	Farm an	nd fishing supplies, chemicals, and feed	
	✓ No ☐ Yes	<del></del> .	
51.	Any fari	m- and commercial fishing-related property you did not already list	
	_	. Give specific rmation	

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Deb	tor 1	LaScha Jones	Case nu	ımber (if known)		
52.		e dollar value of all of your entries from Part 6, includin d for Part 6. Write that number here		_		\$0.00
Pa	art 7:	Describe All Property You Own or Have an Ir	nterest in That You [	Did Not List Above	<del>)</del>	
53.	•	have other property of any kind you did not already lises: Season tickets, country club membership	et?			
	✓ No ☐ Yes	s. Give specific information.				
54.	Add the	e dollar value of all of your entries from Part 7. Write th	nat number here			\$0.00
Pa	art 8:	List the Totals of Each Part of this Form				
55.	Part 1:	Total real estate, line 2		→		\$0.00
56.	Part 2:	Total vehicles, line 5	\$17,000.00			
57.	Part 3:	Total personal and household items, line 15	\$2,200.00			
58.	Part 4:	Total financial assets, line 36	\$7,310.00			
59.	Part 5:	Total business-related property, line 45	\$100.00			
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7:	Total other property not listed, line 54	+ \$0.00			
62.	Total po	ersonal property. Add lines 56 through 61	\$26,610.00	Copy personal property total	+	\$26,610.00
63	Total of	f all property on Schedule A/B. Add line 55 + line 62				\$26.610.00

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Fill in this inf	ormation to id	dentify your	case:				
Debtor 1	LaScha	•	Jones				
Debior	First Name	Middle Name					
Debtor 2	First Name	Middle Name	o Last Namo				
(Spouse, if filing)				II I IK	IOIS		
United States Ba	inkruptcy Court for	ine: <b>NOKTHE</b>	RN DISTRICT OF	ILLIN	013	Check if this is an	
Case number (if known)						amended filing	
Official Form	106C						
Schedule C	: The Prope	rty You Cl	aim as Exem	pt			04/16
Using the property	you listed on Schill out and attach t	nedule A/B: Prop o this page as m	perty (Official Form 10	6A/B	as your source, list t	responsible for supplying correct in the property that you claim as exemplessary. On the top of any additional	ot. If more
is to state a speci exempted up to the receive certain be exemption of 100	ific dollar amound ne amount of any enefits, and tax-ex % of fair market v	t as exempt. Al applicable stat xempt retireme value under a la	ternatively, you may tutory limit. Some e nt fundsmay be un aw that limits the exc	/ claii xemp limite empti	n the full fair marker tionssuch as those d in dollar amount. on to a particular do	you claim. One way of doing so t value of the property being e for health aids, rights to However, if you claim an Illar amount and the value of the ble statutory amount.	
Part 1: Ide	entify the Prop	erty You Cla	aim as Exempt				
1. Which set of	exemptions are	you claiming?	Check one only,	even	if your spouse is filin	g with you.	
<u> </u>	•		kruptcy exemptions. J.S.C. § 522(b)(2)	11 U	S.C. § 522(b)(3)		
2. For any prop	erty you list on S	Schedule A/B th	nat you claim as exe	mpt. f	ill in the information	n below.	
Brief description Schedule A/B tha	of the property a	nd line on	Current value of the portion you	Am	ount of the mption you claim	Specific laws that allow exem	ption
			own Copy the value from Schedule A/B		eck only one box for h exemption		
Brief description:			\$17,000.00	_ <b>_</b>	\$0.00	735 ILCS 5/12-1001(c)	
2014 Chrysler 3 value, per kbb.c	om	)00 miles);			100% of fair market value, up to any applicable statutory limit		
Brief description:			\$0.00	M	\$0.00	735 ILCS 5/12-1001(b)	
owns no furnitu	ire		·		100% of fair market		
Line from Schedul	e A/B: <b>6</b>				value, up to any applicable statutory limit		
(Subject to ac	djustment on 4/01/	19 and every 3 y	more than \$160,375 years after that for ca	ses fi			

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Debtor 1	LaScha Jones	Case number (if known)					
Part 2:	Additional Page						
	iption of the property and line on \/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B		eck only one box for h exemption			
applaince	e, Lab top, TV, Ipad, and small	\$1,800.00		\$1,800.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
Brief descrip Clothes Line from So	otion: chedule A/B: <b>11</b>	\$400.00		\$400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)		
Brief descrip  Cash  Line from Se	otion: chedule A/B: <b>16</b>	\$10.00		\$10.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
Union	otion: account; Chicago Patrol Credit chedule A/B:17.1	\$0.00		\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
Credit Uni	ccount; South Division Federal	\$400.00		\$400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
Brief descrip Checking Line from So		\$1,900.00		\$1,790.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
March of 2	id \$24,250 for this franchise in 2017, :ikare.com/senior-care-	\$5,000.00		\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
and has no business	ell or return it, debtor has been ill ot substainally started the nor has a client list chedule A/B:27						

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		•				
	ormation to ident	ify your case:	_			
Debtor 1	LaScha First Name	Middle Name	Jones Last Name	<del></del>		
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	NORTHERN D	ISTRICT OF ILLINOIS	<u> </u>		
Case number (if known)					Check if this is amended filing	
Official Form	106D					
Schedule D:	<b>Creditors Wh</b>	o Have Cla	ims Secured by	Property		12/15
1. Do any credit ☐ No. Chec ☑ Yes. Fill	ors have claims secu	ured by your prop this form to the c n below.	d case number (if know perty? ourt with your other sche		ning else to report on thi	is form.
claim, list the c creditor has a much as possi creditor's nam	ed claims. If a creditor creditor separately for particular claim, list thible, list the claims in a e.	each claim. If mo e other creditors i alphabetical order	ore than one n Part 2. As according to the	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		secures the	property that claim:	\$17,900.00	\$17,000.00	\$900.00
Gateway One Le Creditor's name	ending	— 2014 chrysl	er 300			
3818 E Coronado Number Street	o Street	_				
Suite 100		_				
		_	e you file, the claim is:	Check all that apply.		
Anaheim	CA 92807	─ ☐ Continger ☐ Unliquida	_			
City	State ZIP Code	Disputed				
Who owes the deb  ✓ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and D  ☐ At least one of		✓ An agreed  Statutory  Judgmen	<ul> <li>check all that apply.</li> <li>ment you made (such as lien (such as tax lien, months)</li> <li>t lien from a lawsuit</li> <li>cluding a right to offset)</li> </ul>		car loan)	
Check if this c		Car loar	1			
Date debt was inc	urred Aug 2014	Last 4 digits	of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$17,900.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$17,900.00

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				-		
Fill in this info	ormation to ide	ntify your ca	ase:			
Debtor 1	LaScha		Jones			
Debtor 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	akruptov Court for th	e NORTHER	N DISTRICT OF ILLINOIS			
	mapley Countries a	.o. <u>11011111111</u>				
Case number (if known)					Check if this is	an
					amended filing	
Official Form	106E/F					
Schedule E/	F: Creditors	Who Have	Unsecured Claims			12/15
on Schedule A/B: Do not include any If more space is no to this page. On the	Property (Official I y creditors with pa eeded, copy the Pa	Form 106A/B) a rtially secured art you need, fil ional pages, w	acts or unexpired leases that coul and on Schedule G: Executory Co claims that are listed in Schedule II it out, number the entries in the rite your name and case number (secured Claims	ntracts and Unexpire D: Creditors Who Ho boxes on the left. At	d Leases (Officia old Claims Secu	al Form 106G). red by Property.
	ors have priority u					
		insecureu ciain	is against you?			
Mo. Got  ☐ Yes.	ο Ραπ 2.					
claim. For each show both price more space is claim, list the	ch claim listed, iden prity and nonpriority needed for priority other creditors in Pa	tify what type of amounts. As m unsecured clain art 3.	creditor has more than one priority unclaim it is. If a claim has both prior such as possible, list the claims in all has, fill out the Continuation Page of	ity and nonpriority amo phabetical order acco Part 1. If more than o	ounts, list that cla	im here and tor's name. If
(For an explan	nation of each type of	of claim, see the	instructions for this form in the inst		B''	NI
				Total claim	Priority amount	Nonpriority amount
2.1					amount	amount
			Last A divite of account number			
Priority Creditor's Name	е		Last 4 digits of account number When was the debt incurred?			
Number Street			when was the debt incurred:		-	
			As of the date you file, the claim	is: Check all that app	ly.	
			Contingent			
			Unliquidated			
City	State ZI	P Code	Disputed			
Who incurred the	debt? Check one	9.	Type of PRIORITY unsecured cla	im:		
Debtor 1 only			Domestic support obligations	a.		
Debtor 2 only Debtor 1 and D	ebtor 2 only		Taxes and certain other debts Claims for death or personal ir		ent	
	the debtors and and	other	intoxicated	ijury wrille you were		
☐ Check if this c	laim is for a comm	unity debt	Other. Specify			
Is the claim subject	ct to offset?					
□ No						
□ Yes						

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Debtor 1	LaScha Jones	Case number (if known)
Part 2	List All of Your NONPRIORIT	Y Unsecured Claims
3. Do a	any creditors have nonpriority unsecured	claims against you?
	No. You have nothing to report in this part Yes	. Submit this form to the court with your other schedules.
If a c	creditor has more than one nonpriority unse of claim it is. Do not list claims already inc	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what luded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2.
		Total claim
4.1		\$730.48
	an Express	Last 4 digits of account number
Nonpriority PO Box	Creditor's Name	When was the debt incurred?
Number	Street	As of the date you file, the claim is: Check all that apply.
		_ Contingent
		Unliquidated
Ft. Laud	lerdale FL 33329	Disputed
City	State ZIP Code	Type of NONPRIORITY unsecured claim:
	urred the debt? Check one. or 1 only	☐ Student loans
ي ا	or 2 only	Obligations arising out of a separation agreement or divorce
ш	or 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts
At lea	ast one of the debtors and another	Other. Specify
☐ Chec	k if this claim is for a community debt	Credit Card
Is the cla	im subject to offset?	
<b>☑</b> No		
☐ Yes		
4.2		\$965.00
Barclay		Last 4 digits of account number
P.O Box	Creditor's Name ( 13337	When was the debt incurred?
Number	Street	As of the date you file, the claim is: Check all that apply.
		_ Contingent
		☐ Unliquidated ☐ Disputed
<b>Philadel</b>		
City	State ZIP Code urred the debt? Check one.	Type of NONPRIORITY unsecured claim:
	or 1 only	☐ Student loans
	or 2 only	Obligations arising out of a separation agreement or divorce
Debto	or 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts
At lea	ast one of the debtors and another	Other. Specify
☐ Chec	k if this claim is for a community debt	Credit Card
Is the cla	im subject to offset?	
<b>☑</b> No		
☐ Yes		

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Debtor 1 LaScha Jones	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.3		\$3,300.00
Capital One	Last 4 digits of account number	
Nonpriority Creditor's Name 15000 Capital One	When was the debt incurred?	
Number Street  Richmond VA 23238	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	
City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Credit Card	
✓ No Yes  4.4		\$9,502.46
Chicago Patrolmens Federal Credit Union	Last 4 digits of account number	
Nonpriority Creditor's Name 1359 W. Washignton Blvd.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Chicago IL 60607		
City State ZIP Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another  ☐ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  ☐ Yes	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Loan	
4.5		\$7,566.53
Chicago Patrolmens Federal Credit Union	Last 4 digits of account number	Ψ1,500.55
Nonpriority Creditor's Name	When was the debt incurred?	
1359 W. Washignton Blvd. Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Chicago IL 60607	─	
City State ZIP Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another  ☐ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Credit Card	
Yes		

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Debtor 1 LaScha Jones	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.6		\$491.00
Chicago Patrolmens Federal Credit Union	Last 4 digits of account number	·
Nonpriority Creditor's Name 1359 W. Washignton Blvd.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	— ☐ Disputed	
Chicago         IL         60607           City         State         ZIP Code	Type of NONDDIODITY unsecured claim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Other	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.7		\$3,410.00
Continental Service Group  Nonpriority Creditor's Name	Last 4 digits of account number	
200 CrossKeys Office Park	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.  —   Contingent	
	Unliquidated	
Fairport NY 14450	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only  Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Collecting for -	
Is the claim subject to offset?  ✓ No		
☑ No □ Yes		
4.8		\$0.00
DePaul University Nonpriority Creditor's Name	Last 4 digits of account number	
1 E. Jackson Blvd.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.  —   Contingent	
	Unliquidated	
Chicago IL 60604-2287	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Tuition	
Is the claim subject to offset?		
☑ No □ Yes		

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Debtor 1 LaScha Jones	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$10,000.00
Little Company of Mary Hospital	Last 4 digits of account number	· · · · · · · · · · · · · · · · · · ·
Nonpriority Creditor's Name 2880 W. 87th St.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Chicago IL 60652-3831		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	medical	
✓ No ☐ Yes		
4.10		\$20,098.48
M3 Financial Services, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 7230	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	Disputed	
Westchester         IL         60154           City         State         ZIP Code	Type of NONDDIODITY ungequired eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify  Collecting for -	
Is the claim subject to offset?		
<b>☑</b> No		
Yes		
4.11		\$270.00
Municipal Collections of American	Last 4 digits of account number	Ψ27 0.00
Nonpriority Creditor's Name	When was the debt incurred?	
3348 Ridge Rd Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent	
	Unliquidated	
Lansing IL 60438-3112	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	Student loans	
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Collecting for -	
Is the claim subject to offset?  No		
☑ No □ Yes		

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Debtor 1 LaScha Jones	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.12		\$1,400.00
Robert J. Adams & Associates	Last 4 digits of account number	<u>-</u>
Nonpriority Creditor's Name 544 W. 35th Ave	When was the debt incurred? 11/08/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Chicago IL 60616		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Attorney Fees	
✓ No		
Yes		
4.13		<b>£0.00</b>
	Last 4 digits of account number	\$0.00
The University of Chicago Hospital Nonpriority Creditor's Name	When was the debt incurred? Nov 17/ Feb 28	
8201 S. Cass Ave		
Number Street	As of the date you file, the claim is: Check all that apply.  — ☐ Contingent	
	Unliquidated	
Darien IL 60561	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only  Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
☑ No		
Yes		
4.14		\$30,000.00
The University of chicago Medical Center	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Chicago IL 60693	─	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	Student loans	
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Medical Medical	
Is the claim subject to offset?  No		
✓ No Yes		

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Debtor 1 LaScha Jones	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number ther previous page.  4.15	m sequentially from the	Total claim
Walmart	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 530937	When was the debt incurred?	
Atlanta GA 30353-0937	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	
City State ZIP Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another  ☐ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  ☐ Yes	Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card	

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Debtor 1	LaScha Jones		Case number (if known)	
Part 3:	List Others to B	e Notified Ab	bout a Debt That You Already Listed	
For ex credite debts	cample, if a collection a or in Parts 1 or 2, then	gency is trying t list the collectio 1 or 2, list the a	notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. to collect from you for a debt you owe to someone else, list the original on agency here. Similarly, if you have more than one creditor for any of the additional creditors here. If you do not have additional parties to be notified for ubmit this page.	
Central C	redit Services, Inc.		On which entry in Part 1 or Part 2 did you list the original creditor?	
Name PO Box 1	 53		Line <b>4.1</b> of (Check one):  Part 1: Creditors with Priority Unsecured Claims	i
Number	Street		Part 2: Creditors with Nonpriority Unsecured Cla	
Saint Cha	rles MO State	<b>63302</b> ZIP Code	Last 4 digits of account number	
Harris & F	- Harris		On which entry in Part 1 or Part 2 did you list the original creditor?	
Name <b>222 Merci</b> Number	nandise Mart Plaza, s Street	ste. 1900	Line 4.14 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims	
Chicago City	IL State	<b>60654</b> ZIP Code	Last 4 digits of account number	
Sallie Mae	)		On which entry in Part 1 or Part 2 did you list the original creditor?	
Name 1002 Arth Number	ur Dr. Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Student loan Part 2: Creditors with Nonpriority Unsecured Claims	
			Last 4 digits of account number	
Lynn Have City	en FL State	<b>32444</b> ZIP Code	<del></del>	

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Debtor 1	LaScha Jones	Case number (if known)	
Part 4:	Add the Amounts for Each Type of Unsecured Claim		

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	<sup>6d.</sup> <b>-</b>	\$0.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	<sup>6i.</sup> ◀	\$88,202.95
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	\$88,202.95

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Fill in this inf	ormation to iden			
Debtor 1	LaScha First Name	Middle Name	Jones Last Name	
Debtor 2				
(Spouse, if filing)		Middle Name	Last Name	
	nkruptcy Court for the	: NORTHERN DIS	TRICT OF ILLINOIS	
Case number (if known)				Check if this is an amended filing

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
  is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
  executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this in	formation to i	dentify your case:			
Debtor 1	LaScha		Jones		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	) First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS		
Case number					
(if known)				Check if this is an amended filing	
Off: -: - 1	40011				
Official Form					
Schedule H	: Your Cod	ebtors		1:	2/15
	any codebtors?		nt case, do not list either spou	wn). Answer every question. se as a codebtor.)	
	•	•	• • • •	(Community property states and territories as, Washington, and Wisconsin.)	
<b>☑</b> No. Go	to line 3.				
		rmer spouse, or legal e	quivalent live with you at the tir	ne?	
□ No					
Yes 3. In Column 1,		adabtara. Da nat inal	udo vour anougo oo o godob	or if your spouse is filing with you. List the	
person show creditor on S	vn in line 2 again S <i>chedule D</i> (Offic	as a codebtor only if	that person is a guarantor or dule E/F (Official Form 106E/	cosigner. Make sure you have listed the F), or <i>Schedule G</i> (Official Form 106G). Use	
Column 1	: Your codebtor			Column 2: The creditor to whom you owe the de	ebt
				Check all schedules that apply:	

Official Form 106H Schedule H: Your Codebtors page 1

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Fill in this infor	mation to ident	ifv your case:					
Debtor 1	LaScha		Jones				
Depioi i	First Name	Middle Name	Last Name			Che	eck if this is:
Debtor 2							An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name				-
United States Bank	kruptcy Court for the	: NORTHERN	DISTRICT OF IL	LINO	IS		A supplement showing postpetition chapter 13 income as of the following date:
(if known)	-			_			MM / DD / YYYY
Official Form 1	061						WINT, DB / TTTT
Schedule I: Yo	our Income						12/15
responsible for supp include information a about your spouse. your name and case	lying correct infor about your spouse If more space is no	mation. If you are If you are separe eded, attach a se Answer every o	e married and not rated and your sport	filing ouse is	jointly, and s not filing	l your with y	I Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
Fill in your emplinements     information.	loyment		Debtor 1				Debtor 2 or non-filing spouse
If you have more	_	laaut atatus					<u></u>
job, attach a sepa	arato pago .	loyment status	✓ Employed Not employed	ed			<ul><li>☐ Employed</li><li>☐ Not employed</li></ul>
additional employ	vers.	upation					
Include part-time		ирацоп					
or self-employed		loyer's name					
Occupation may	include <b>Fmr</b>	loyer's address					
student or homer	maker, if it	loyer 3 dddress	Number Street				Number Street
applies.							_
			City		State Zip C	Code	City State Zip Code
	How	long employed t	here?				
Part 2: Give	Details About N	Monthly Incom					
		-					de de la companya de
non-filing spouse unle		•	n. If you have noth	ing to	report for a	ny iine	, write \$0 in the space. Include your
If you or your non-filing you need more space	<b>.</b>		er, combine the info	ormati	on for all er	nploye	rs for that person on the lines below. If
					For Debto	r 1	For Debtor 2 or non-filing spouse
	oss wages, salary, is). If not paid mont			2.		00.00	
3. Estimate and lis	t monthly overtime	pay.		3. 4		0.00	
4. Calculate gross	income. Add line	2 + line 3.		4.		0.00	

Official Form 106I Schedule I: Your Income page 1

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Deb	tor 1	LaScha Jones			Case nui	mbei	r (if knowi	n)		
				F	For Debtor 1		or Debto on-filing		)	
	Сор	y line 4 here	······ →	4.	\$0.00	_		•	_	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Socia	l Security deductions	5a.	\$0.00					
	5b.	Mandatory contributions	for retirement plans	5b.	\$0.00					
	5c.	Voluntary contributions f	or retirement plans	5c.	\$0.00					
	5d.	Required repayments of	retirement fund loans	5d.	\$0.00					
	5e.	Insurance		5e.	\$0.00					
	5f.	Domestic support obligation	tions	5f.	\$0.00					
	5g.	Union dues		5g.	\$0.00					
	5h.	Other deductions. Specify:		5h. <b>+</b>	\$0.00					
6.	Add 5g +	the payroll deductions. 5h.	Add lines 5a + 5b + 5c + 5d + 5e + 5f +	6.	\$0.00					
7.	Calc	culate total monthly take-h	ome pay. Subtract line 6 from line 4.	7.	\$0.00					
8.	List	all other income regularly	received:							
	8a.	Net income from rental p business, profession, or	roperty and from operating a farm	8a.	\$0.00					
			h property and business showing d necessary business expenses, and ne.							
	8b.	Interest and dividends		8b.	\$0.00					
	8c.	Family support payments dependent regularly rece	s that you, a non-filing spouse, or a ive	8c.	\$0.00					
		Include alimony, spousal s divorce settlement, and pro	upport, child support, maintenance, operty settlement.							
	8d.	Unemployment compens	ation	8d.	\$1,984.00					
	8e.	Social Security		8e.	\$0.00					
	8f.	Other government assist	ance that you regularly receive							
		cash assistance that you re	nd the value (if known) or any non- eceive, such as food stamps mental Nutrition Assistance Program)							
		Specify:		8f.	\$0.00					
	8g.	Pension or retirement inc	come	- 8g.	\$0.00					
	8h.	Other monthly income.		_						
		Specify:		8h. <b>+</b>	\$0.00					
9.	Add	all other income. Add line	es 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$1,984.00					
10.		culate monthly income. A	dd line 7 + line 9. btor 1 and Debtor 2 or non-filing spouse.	10.	\$1,984.00	+[			=[	\$1,984.00
11.			utions to the expenses that you list in S	chedule	e J.					
	Inclu		nmarried partner, members of your househ			ır ro	ommates	, and otl	ner	
	Do r	not include any amounts alre	eady included in lines 2-10 or amounts tha	at are no	t available to pay	expe	enses liste	ed in Sc	hedi	ule J.
	Spe	cify:						11.	+	\$0.00
12.	inco		lumn of line 10 to the amount in line 11. he Summary of Your Assets and Liabilities					12.		\$1,984.00 Combined
12	Do.	ou expect an increase or	decrease within the year after you file t	hic form	n2				r	monthly income
13.	`	·	decrease within the year after you file t	11101 6111						
	⊻	No. None.								
	Ц	Yes. Explain:								

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F	ill in this inform	ation to identify	y your case:				.1.26.6.5.	•-		
	Debtor 1	LaScha		Jones		_	ck if this	ıs: nded filing		
	Debior 1	First Name	Middle Name	Last Nar			A supple	ement showing		
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nar	me		following	13 expenses as g date:	s or the	
	United States Bankru	uptcy Court for the:	NORTHERN DIST	RICT OF	ILLINOIS		MM / DE	D / YYYY	<u> </u>	
	Case number (if known)									
0	fficial Form 10	<u>6J</u>				_				
S	chedule J: Yo	ur Expenses	3							12/15
co na	rrect information. If me and case numbe	more space is nee								
1.	Is this a joint case	)?								
2.	_ No	Debtor 2 must file	parate household?  Official Form 106J-2,	Expenses	for Separate Housel	hold of	f Debtor 2	2.		
	Do not list Debtor 1 Debtor 2.	land 🔲	Yes. Fill out this infor for each dependent		Dependent's relation Debtor 1 or Debtor		p to	Dependent's age	Does depe	
	Do not state the de names.	pendents'							Yes	
3.	Do your expenses expenses of peoply yourself and your	le other than	✓ No ☐ Yes						- ∏ Yes	
F	Part 2: Estima	te Your Ongoin	ng Monthly Exper	nses						
to		of a date after the l	ruptcy filing date unlo bankruptcy is filed. I	-	-			-		
			government assista Schedule I: Your Inc	-				Your expens	ses	
4.			nses for your residen ny rent for the ground				4		\$60	0.00
	If not included in I	ine 4:	-							
	4a. Real estate ta	xes					4	a		
	4b. Property, hom	eowner's, or renter's	s insurance				4	b		
	4c. Home mainter	nance, repair, and u	pkeep expenses				4	c		
	4d. Homeowner's	association or cond	lominium dues				4	d.		

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Det	otor 1 LaScha Jones	Case number (if known)
		Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.
6.	Utilities:	
	6a. Electricity, heat, natural gas	6a.
	6b. Water, sewer, garbage collection	6b.
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. <b>\$150.</b> C
	6d. Other. Specify:	6d
7.	Food and housekeeping supplies	7. <b>\$300.</b> 0
8.	Childcare and children's education costs	8.
9.	Clothing, laundry, and dry cleaning	9. <b>\$50.0</b>
10.	Personal care products and services	10. <b>\$50.</b> 0
11.	Medical and dental expenses	11. <b>\$50.0</b>
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. <b>\$100.</b> 0
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.
14.	Charitable contributions and religious donations	14.
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.	
	15a. Life insurance	<b>15</b> a.
	15b. Health insurance	15b.
	15c. Vehicle insurance	15c. <b>\$100.</b> 0
	15d. Other insurance. Specify:	15d.
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.
17.	Installment or lease payments:	
	17a. Car payments for Vehicle 1 car payment	17a <b>\$547.</b> (
	17b. Car payments for Vehicle 2	17b
	17c. Other. Specify:	17c
	17d. Other. Specify:	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.
19.	Other payments you make to support others who do not live with you.	
	Specify:	19.

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Deb	tor 1	LaScha Jones	Case number (if known)	
		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Other	r. Specify:	21. <b>+</b>	
22.	Calcu	late your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$1,947.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2. 22b	_
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$1,947.00
23.	Calcu	late your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$1,984.00
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>–</b>	\$1,947.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$37.00
24.	Do yo	ou expect an increase or decrease in your expenses within the year after yo	ou file this form?	
		xample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your mort	. ,	
	<u> </u>	No.		
	<b>☑</b> \	Yes. Explain here: Lives with room mate and is not paying rent right now		
		μ.,		

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	ill in this inf	ormation to i	dentify your case:			
	ebtor 1	LaScha	dentity your case.	_		
"	ebtor r	First Name	Middle Name	Jones Last Name	-	
	ebtor 2				_	
(5	Spouse, if filing)	First Name	Middle Name	Last Name		
U	nited States Ba	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS	_	
1 -	ase number f known)				<b>—</b>	if this is an ed filing
<u>Of</u>	ficial Form	106Sum				
Sı	ımmary of	Your Ass	ets and Liabilit	ies and Certain Sta	atistical Information	12/15
cor sch	rect informationedules after yo	n. Fill out all of	your schedules first; inal forms, you must f	then complete the informat	r, both are equally responsible t tion on this form. If you are filin check the box at the top of this	g amended
						Your assets
						Value of what you own
1.	Schedule A/B	: Property (Offici	al Form 106A/B)			•
	1a. Copy line	e 55, Total real e	state, from Schedule A/	В		\$0.00
	1b. Copy line	e 62, Total perso	nal property, from Sche	dule A/B		\$26,610.00
	1c. Copy line	e 63, Total of all p	property on Schedule A	/B		\$26,610.00
Р	art 2: Su	mmarize You	r Liabilities			
						Your liabilities Amount you owe
2.				Property (Official Form 106D claim, at the bottom of the la	o) ast page of Part 1 of Schedule D	\$17,900.00
3.				s (Official Form 106E/F) red claims) from line 6e of S	chedule E/F	\$0.00
	3b. Copy the	total claims fron	n Part 2 (nonpriority uns	secured claims) from line 6j o	f Schedule E/F	+\$88,202.95
					Your total liabilities	\$106,102.95
P	art 3: Su	mmarize You	r Income and Exp	enses		
4.		our Income (Officently)	,	Schedule I		\$1,984.00

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$1,947.00

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Deb	otor 1	LaScha Jones	Case number (if known)		
Part 4: Answer These Questions for Administrative and Statistical Records					
6.	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?				
		No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes			
7.	What kind of debt do you have?				
		Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.			
		Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.			
В.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.  \$894.83				
2. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:					
		Total claim			
From Part 4 on Schedule E/F, copy the following:					
	9a. D	Oomestic support obligations. (Copy line 6a.)	\$0.0	00	
	9b. T	axes and certain other debts you owe the government. (Copy line 6b.)	\$0.0	00	
	9c. C	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.0	00	
	9d. S	Student loans. (Copy line 6f.)	\$0.0	00	
	9e. C	Obligations arising out of a separation agreement or divorce that you did not re	port as <b>\$0.0</b>	00	

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

\$0.00

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Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	LaScha First Name	Middle Name	Jones Last Name	$\Box$
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Ba	nkruptcy Court fo	r the: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS	_
Case number (if known)				☐ Check if this is an amended filing
Official Form	106Dec			
Declaration	About an I	ndividual Debt	or's Schedules	12/15
	ın Below	,	18 U.S.C. §§ 152, 1341, 15	
		someone who is NOT	an attorney to help you fil	I out bankruptcy forms?
✓ No			, ,,	
Yes. Na	ame of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalt true and corr		clare that I have read	the summary and schedu	lles filed with this declaration and that they are
X /s/ LaSch	na Jones		X	

Signature of Debtor 2

MM / DD / YYYY

Date

LaScha Jones, Debtor 1

MM / DD / YYYY

Date <u>03/07/2018</u>

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F	ill in this info	ormation to id	lentify yo	ur case:					
D	ebtor 1	LaScha		Jon					
		First Name	Middle N	Name Last	Name				
	ebtor 2 Spouse, if filing)	First Name	Middle N	Name Last	Name				
U	nited States Bar	nkruptcy Court for	the: NORT	HERN DISTRICT	Γ OF ILL	INOIS			
	ase number	, ,						Chook if this	io on
(if	known)							Check if this amended fili	
Of	ficial Form	107							
			Affairs	for Individua	als Fil	ing for Ban	krupt	tcy	04/16
you	rect informations and case	n. If more space se number (if kno	is needed, own). Ansv		sheet to	this form. On the	ne top c	ually responsible for surfany additional pages,	
			1-10						
1.	Married	current marital s	tatus?						
_	✓ Not marrie								
2.	During the las	st 3 years, have y	ou lived an	nywhere other thar	n where	you live now?			
	<u> </u>	all of the places y	ou lived in tl	he last 3 years. Do	not inclu	ude where you live	e now.		
3.	(Community p			•				property state or territo , New Mexico, Puerto Ri	•
	No No Mak	o curo vou fill out	Sahadula H	l: Your Codebtors (0	Official E	orm 106H)			
					Official F	omi room.			
Р	art 2: Exp	olain the Sour	ces of Yo	our Income					
4.	Fill in the total	amount of income	e you receiv	ent or from operation of the come that you rece	d all busi	nesses, including	part-tim		endar years?
	□ No ✓ Yes. Fill in	n the details.							
	_			Debtor 1				Debtor 2	
				Sources of income	e.	Gross income	So	urces of income	Gross income
				Check all that apply		(before deduction and exclusions		eck all that apply.	(before deductions and exclusions
		the current year	until	Wages, commi bonuses, tips	ssions,		_ □	Wages, commissions, bonuses, tips	
0	auto you mou .	or builtingtoy:		Operating a bu	siness			Operating a business	
For	the last calend	lar vear:		₩ Wages, commi	ssions	¢c 000	00 L	Wages, commissions,	
		•	١	bonuses, tips	0310113,	\$6,000.	<u>oo</u>	bonuses, tips	
(Jdl	idaly I to Decel	mber 31, <u><b>2017</b></u> YYYY	!	Operating a but	siness			Operating a business	
For	the calendar y	ear before that:		✓ Wages, commi	ssions,	\$80,170.	00 🗆	Wages, commissions,	
		mber 31, <b>2016</b>	)	bonuses, tips	siness		_	bonuses, tips Operating a business	

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Debtor 1	LaScha Jones		Case nur	mber (if known)	
5. Did you receive any other income during this year or the two pre Include income regardless of whether that income is taxable. Examp unemployment; and other public benefit payments; pensions; rental in and gambling and lottery winnings. If you are in a joint case and you Debtor 1.		ples of other income are income; interest; dividen u have income that you re	ds; money collected from eceived together, list it on	lawsuits; royalties;	
	each source and the gross income fr No Yes. Fill in the details.	om each source separately	. Do not include income	that you listed in line 4.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
	nuary 1 of the current year until you filed for bankruptcy:	unemployment	\$1,084.00		
	ast calendar year:  1 to December 31, 2017 )	unemployment Severance pay	\$8,519.00 \$34,000.00		
	calendar year before that:  1 to December 31, 2016				

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Deb	otor 1	LaScha Jones	Case number (if known)
P	art 3:	List Certain Payments You Ma	ade Before You Filed for Bankruptcy
6.	Are eith	er Debtor 1's or Debtor 2's debts prim	arily consumer debts?
	□ No.	-	rimarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as a personal, family, or household purpose."
		During the 90 days before you filed fo	r bankruptcy, did you pay any creditor a total of \$6,425* or more?
		☐ No. Go to line 7.	
		total amount you paid that cr	hom you paid a total of \$6,425* or more in one or more payments and the reditor. Do not include payments for domestic support obligations, such as also, do not include payments to an attorney for this bankruptcy case.
		* Subject to adjustment on 4/01/19 an	d every 3 years after that for cases filed on or after the date of adjustment.
	<b>∀</b> Yes	Debtor 1 or Debtor 2 or both have p	rimarily consumer debts.
		During the 90 days before you filed fo	r bankruptcy, did you pay any creditor a total of \$600 or more?
		No. Go to line 7.	
		creditor. Do not include pay	hom you paid a total of \$600 or more and the total amount you paid that ments for domestic support obligations, such as child support and alimony. ts to an attorney for this bankruptcy case.
7.	Insiders corporat agent, in	include your relatives; any general partrons of which you are an officer, director	did you make a payment on a debt you owed anyone who was an insider? hers; relatives of any general partners; partnerships of which you are a general partner; hers, person in control, or owner of 20% or more of their voting securities; and any managing has a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations
	✓ No ☐ Yes	List all payments to an insider.	
В.		year before you filed for bankruptcy, d an insider?	did you make any payments or transfer any property on account of a debt that
	Include	payments on debts guaranteed or cosign	ed by an insider.
	✓ No ☐ Yes	List all payments that benefited an insi	der.
P	art 4:	Identify Legal Actions, Repos	sessions, and Foreclosures
9.	List all s		were you a party in any lawsuit, court action, or administrative proceeding? ses, small claims actions, divorces, collection suits, paternity actions, support or custody
	✓ No ☐ Yes	Fill in the details.	

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Deb	tor 1	LaScha Jones			Case number (if k	nown)	
10.	seized,	year before you file or levied? Il that apply and fill ir	_	tcy, was any of your property repossow.	essed, foreclose	d, garnished, attach	ed,
		Go to line 11.  Fill in the information	on below.				
11.		•		iptcy, did any creditor, including a ba make a payment because you owed		stitution, set off any	,
	✓ No ☐ Yes	. Fill in the details.					
12.	<ol><li>Within 1 year before you filed for bankru creditors, a court-appointed receiver, a c</li></ol>				possession of an	assignee for the be	nefit of
	✓ No ☐ Yes						
Pa	art 5:	List Certain Gi	ifts and Con	tributions			
13.	Within 2	years before you fi	iled for bankru	ptcy, did you give any gifts with a tot	al value of more t	than \$600 per perso	n?
	✓ No ☐ Yes	. Fill in the details fo	or each gift.				
14.	Within 2 to any o	•	iled for bankru	ptcy, did you give any gifts or contrit	outions with a tota	al value of more tha	n \$600
	✓ No ☐ Yes	. Fill in the details fo	or each gift or co	entribution.			
Pa	art 6:	List Certain Lo	osses				
15.		year before you file saster, or gambling	-	tcy or since you filed for bankruptcy	, did you lose any	thing because of th	eft, fire,
	✓ No ☐ Yes	. Fill in the details.					
Pa	art 7:	List Certain Pa	ayments or 1	<b>Fransfers</b>			
16.	anyone Include	you consulted abou	ut seeking ban	tcy, did you or anyone else acting or kruptcy or preparing a bankruptcy pe eparers, or credit counseling agencies	etition?		
				Description and value of any proper	ty transferred	Date payment	Amount of
	on Who W	dams & Associate as Paid	es			or transfer was made	payment
544 Num	W. 35th ber Stre					10/30/2017	\$900.00
Chi City	cago	<b>IL</b> State	<b>60616</b> ZIP Code				
Ema	il or websit	e address					
Pers	on Who M	ade the Payment, if Not	You				

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Deb	otor 1 LaScha Jones Case number (if known)
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
	Do not include any payment or transfer that you listed on line 16.
	✓ No ☐ Yes. Fill in the details.
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
	Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property).  Do not include gifts and transfers that you have already listed on this statement.
	✓ No  Yes. Fill in the details.
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)
	✓ No  Yes. Fill in the details.
P	List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.
	✓ No ☐ Yes. Fill in the details.
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?
	✓ No ☐ Yes. Fill in the details.
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?
	✓ No  Yes. Fill in the details.
P	Identify Property You Hold or Control for Someone Else
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.
	✓ No  Yes. Fill in the details.

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Deb	tor 1	LaScha Jones		case number (if known)				
Pa	art 10:	Give Details About En	vironmental Information					
For	the purp	oose of Part 10, the following	definitions apply:					
h	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.							
Rep	ort all n	otices, releases, and proceed	lings that you know about, regardless of wh	en they occurred.				
24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	✓ No ☐ Yes. Fill in the details.							
25.	•	ou notified any governmental	unit of any release of hazardous material?					
	✓ No  ☐ Yes. Fill in the details.							
26.	Have you		l or administrative proceeding under any er	vironmental law? Include settlements and				
	✓ No ☐ Yes	s. Fill in the details.						
Pa	art 11:	Give Details About Yo	our Business or Connections to Any	Business				
27.	Within busine	-	ankruptcy, did you own a business or have	any of the following connections to any				
	<ul> <li>✓ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time</li> <li>✓ A member of a limited liability company (LLC) or limited liability partnership (LLP)</li> <li>✓ A partner in a partnership</li> <li>✓ An officer, director, or managing executive of a corporation</li> <li>✓ An owner of at least 5% of the voting or equity securities of a corporation</li> </ul>							
	<ul> <li>No. None of the above applies. Go to Part 12.</li> <li>✓ Yes. Check all that apply above and fill in the details below for each business.</li> </ul>							
	nes Cu	ustom Care	Describe the nature of the business Health Care, right now cannot get a license start because the business	Employer Identification number Do not include Social Security number or ITIN.				
		ith Place	has not met the requirements of the	EIN:				
Num	ber Str	eet	State of Illinois.  Name of accountant or bookkeeper	Dates business existed				
Chi	cago	IL 60652		From <u>03/01/2017</u> To				
City	cayu	State ZIP Code	-					

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Deb	otor 1	LaScha Jones	Case number (if known)
28.		in 2 years before you filed fo	or bankruptcy, did you give a financial statement to anyone about your business? Include s, or other parties.
	بخا	No Yes. Fill in the details below.	
P	art 1	2: Sign Below	
that pro or b	t ansv perty ooth.	vers are true and correct. I u by fraud in connection with 18 U.S.C. §§ 152, 1341, 1519	
-		Scha Jones a Jones, Debtor 1	XSignature of Debtor 2
	Date	03/07/2018	Date
Did	you a	attach additional pages to Yo	ur Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
<b>☑</b>	No Yes		
Did	you p	pay or agree to pay someone	who is not an attorney to help you fill out bankruptcy forms?
$\overline{\mathbf{Q}}$	No		
		Name of person	Attach the Bankruptcy Petition Preparer's Notice,

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Debtor 1	LaScha		Jones		
	First Name	Middle Name	Last Name		
Debtor 2					
Spouse, if filing)	First Name	Middle Name	Last Name		
Jnited States Bar	nkruptcy Court fo	or the: <b>NORTHERN D</b>	STRICT OF ILLINOIS	<u>s</u>	
Case number					☐ Check if this is an
if known)					amended filing
official Form	108				
		for Individuals	Filing Under C	Chapter 7	12/1
				•	
you are an indiv	idual filing unde	er chapter 7, you must	fill out this form if:		
creditors have	claims secured	by your property, or			
you have lease	d personal prop	perty and the lease has	s not expired.		
	hever is earlier,	•	•	uptcy petition or by the date . You must also send copies	
two married peo			both are equally respo	onsible for supplying correct	information.
	•		- :	annovata abaat ta thia farm	On the ten of en.
•		e and case number (if		separate sheet to this form.	On the top of any
Part 1: Lis	t Your Credit	tors Who Hold Sec	ured Claims	_	
	itors that you lis	sted in Part 1 of Sched	ule D: Creditors Who	Hold Claims Secured by Pro	perty (Official Form 106D),
Identify the c	reditor and the p	property that is collate	•	u intend to do with the at secures a debt?	Did you claim the property as exempt on Schedule C?
	Gateway Or	ne Lending	<u> </u>	der the property. the property and redeem it.	□ No □ Yes
Creditor's name:			Retain		
	2014 chrysl	er 300	☑ Retain	the property and enter into a	
name:	_	er 300	Retain Reaffire	the property and enter into a mation Agreement. the property and [explain]:	
name:  Description of property	_	er 300	Retain Reaffiri	mation Agreement.	
name:  Description of property securing debt:	:	er 300 Dired Personal Pro	☑ Retain  Reaffiri  Retain	mation Agreement.	
name:  Description of property securing debt:  Part 2: Lise or any unexpired in the informati	et Your Unexp d personal prope ion below. Do n	pired Personal Pro erty lease that you liste not list real estate leas	Retain Reaffird Retain  Perty Leases  ed in Schedule G: Execute  es. Unexpired leases a	mation Agreement. the property and [explain]:	

None.

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Debtor 1	LaScha Jones	Case number (if known)
Part 3:	Sign Below	
	penalty of perjury, I declare that is subject to a	I have indicated my intention about any property of my estate that secures a debt and unexpired lease.
X /s/ LaS	cha Jones	X
LaScha	Jones, Debtor 1	Signature of Debtor 2
Date 0	3/07/2018	Date
N	IM / DD / YYYY	MM / DD / YYYY

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B2030 (Form 2030) (12/15)

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

In	re LaScha Jones	Case No.	
		Chapter	7
	DISCLOSURE OF COMPENSATION OF ATTO	ORNEY FOR	DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am that compensation paid to me within one year before the filing of the petition is services rendered or to be rendered on behalf of the debtor(s) in contemplation is as follows:	n bankruptcy, or a	agreed to be paid to me, for
	For legal services, I have agreed to accept	\$	1,800.00
	Prior to the filing of this statement I have received		\$400.00
	Balance Due	<u> </u>	1,400.00
2.	The source of the compensation paid to me was:  Debtor Other (specify)		
3.	The source of compensation to be paid to me is:		
	✓ Debtor ☐ Other (specify)		
4.	✓ I have not agreed to share the above-disclosed compensation with any of associates of my law firm.	other person unle	ss they are members and
	☐ I have agreed to share the above-disclosed compensation with another passociates of my law firm. A copy of the agreement, together with a list o compensation, is attached.		
5.	In return for the above-disclosed fee, I have agreed to render legal service for	r all aspects of th	e bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor bankruptcy;	otor in determinin	g whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs and	plan which may b	pe required;
	c. Representation of the debtor at the meeting of creditors and confirmation h	hearing, and any	adjourned hearings thereof;

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B2030 (Fo	orm 2030)	(12/15)
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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

#### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

03/07/2018 /s/ Robert J. Adams & Associates

Date Robert J. Adams & Associates
Robert J Adams & Associates
901 W. Jackson Suite 202

901 W Jackson Suite 202 Chicago, IL 60607

Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056

/s/ LaScha Jones

LaScha Jones

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### **UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)**

IN RE: LaScha Jones CASE NO

CHAPTER 7

<u>ve</u>	ERIFICATION OF CREDITOR MATRIX
The above named Debtor hereby knowledge.	verifies that the attached list of creditors is true and correct to the best of his/her
Date 3/7/2018	Signature /s/ LaScha Jones  LaScha Jones
Date	Signature

American Express PO Box 7871 Ft. Lauderdale, FL 33329

Barclaycard P.O Box 13337 Philadelphia, PA 19101-3337

Capital One 15000 Capital One Richmond, VA 23238

Central Credit Services, Inc. PO Box 153 Saint Charles, MO 63302

Chicago Patrolmens Federal Credit Union 1359 W. Washignton Blvd. Chicago, IL 60607

Continental Service Group 200 CrossKeys Office Park Fairport, NY 14450

DePaul University 1 E. Jackson Blvd. Chicago, IL 60604-2287

Gateway One Lending 3818 E Coronado Street Suite 100 Anaheim, CA 92807

Harris & Harris 222 Merchandise Mart Plaza, ste. 1900 Chicago, IL 60654 IRS PO Box 21126 Philadelphia, PA 19114

IRS Mail Stop 5010 CHI Chicago, IL 60604

IRS Assoc. Area Counsel, SB/SE 200 W. Adams, Ste. 2300 Chicago, IL 60606-5208

Little Company of Mary Hospital 2880 W. 87th St. Chicago, IL 60652-3831

M3 Financial Services, Inc. PO Box 7230 Westchester, IL 60154

Municipal Collections of American 3348 Ridge Rd Lansing, IL 60438-3112

Robert J. Adams & Associates 544 W. 35th Ave Chicago, IL 60616

Sallie Mae 1002 Arthur Dr. Lynn Haven, FL 32444

The University of Chicago Hospital 8201 S. Cass Ave Darien, IL 60561

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The University of chicago Medical Center 15965 Collections Center Drive Chicago, IL 60693

Walmart PO Box 530937 Atlanta, GA 30353-0937